



## Arkansas Early Childhood Comprehensive Systems Initiative

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**Social Emotional Health Work Group - November 18, 2004, 1 - 3 p.m.**

**Members Present:** Sherrill Archer, Bruce Cohen, Richard Hill, Lynn Lincoln, Martha Reeder, Dan Sullivan, and Paula C. Watson. First time attending members, Richard Hill and Lynn Lincoln were introduced.

**Regrets:** John Allen, Sarah Breshears, Laura Butler, Jannie Cotton, Deborah Gangluff, Betti Hamilton, Berthena Nunn, Ann Patterson, and Sandra Reifeiss.

Bruce indicated that Patti Bokony would not be present because of a last-minute deadline.

### **Agenda Item #1: Overview of Other Efforts in the Early Childhood Area**

**Discussion:** Martha discussed the **Strengthening Families Initiative** (designing child abuse and neglect interventions through early child care settings). AECCS is attempting to engage all stakeholders, getting them to talk and work together for the benefit of families and children. The challenge is to keep track of what else is going on and anticipated efforts.

As groups convene, they are forming relationships. As you look at the web site and you will see that there is a pretty wide representation on these groups. You have a group of people together that are ready to take advantage of other opportunities when they arise.

The Center for the Study of Social Policy from the Doris Duke Foundation has a grant program called, **Strengthening Families through Early Care and Education**. A lot of their parameters coincide with the AECCS effort. The idea is to address child abuse and neglect through child care facilities. A partnership representing the AECCS and other stakeholders has applied for a technical assistant grant.

The partnership asked this group to provide technical assistance in a specific area. They asked for help in developing a tool based on the domains we have been focusing on. This tool will work on family map factors and activities will track back to one of these indicators.

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Martha touched on the Family Map areas that we had included in our plan and the overlap between the areas they focus on and the areas our efforts and the **Strengthening Families** group also address.

Early childhood educators in Arkansas are developing other materials based on this gathered information. It also involves professional development. This process has laid some good groundwork.

**Result:** Arkansas is one of seven states, out of a total of 28 states, that has been chosen to meet with the grantor in Albuquerque, New Mexico, on December 1, 2, and 3. Only three states will be chosen. Arkansas is the only southern state.

**Note:** DHS/DCCECE has been notified that the grantor wishes to fund all seven of the states, but has asked each state to respond to some additional questions before the final decision is made. Responses from the state team are due December 17, with a final notification expected by January 5.

**Agenda Item #1, Continued: Overview of Other Efforts in the Early Childhood Area**

**Discussion:** Dan noted that during a recent legislative meeting, Jan Judy presented a draft of mental health issues that included suggestions in early childhood that mirrored this work group. He noted that some legislators expressed some hesitation about universal screening for social-emotional issues.

Bruce pointed out that the recommendations for the **document actually come from the work done in the social-emotional health work group.**

Dan suggested, that when trying to look at the early childhood system, that data gathered needs to be from all sources (public and private providers). He mentioned that his employer has never had anyone collect data from it related to early childhood settings, to his knowledge.

Martha mentioned that Patti Bokony is a researcher. She has put together a grant proposal seeking a grant to coordinate services. She has used some of what is being done in Arkansas as a basis for the proposal, including the collaborative efforts of DHS Division of Behavioral Health, DHS Division of Child Care, and the State Head Start Collaboration Project. This project consists of a training track for Public Mental Health Early Childhood Liaisons, ongoing conference call series, and three pilot projects that pair mental health professionals with community child care providers.

**Other Work Groups:** A discussion was held related to the work of other work groups and some specific information needed from this group.

Sherrill and Martha discussed the tool kit that the Family Support Work Group has focused on as their project. They have requested representatives from each of the other work groups to come together to help with this as a subgroup. Martha noted that Patti is interested and invited others in the group to be a part of this effort. The subgroup would define the parameters of the tool kit for each work group involved in the tool kit.

Specific issues for Social-Emotional Health would include providing ideas about family involvement, assessment tools or items, parent resources, and ways to identify and  
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involve families. Every group has decided that they wanted something related to the family.

The Early Care and Education Work Group is looking at a system of tiered quality, where child care facilities will be rated on quality indicators. The centers would be reimbursed based on quality. A copy of the rough draft tiered quality strategy sheets was distributed. This sheet identifies some of the components of quality.

On Page 2, there is a section that is completely blank (Parent/Family/Community). Recommendations are needed from other groups. Questions: What do you think quality means in relationship to these items? The Early Care and Education group is asking for concrete recommendations that relate to child care facilities.

On December 17, Eva Carter and Judy Collins will be coming to the Early Care meeting. They are going to share with that group how other states have approached it. The meeting will be opened up to a limited participation from members of the other groups.

Some recommendations will represent major policy changes. This is an opportunity to build into the system some of the things we may want. The state early childhood division has been very progressive. This is part of our effort and they may not wait.

Dan discussed models and training he or his co-workers attended. Positive Behavior Intervention and Support has been recommended by ADE for school-based mental health interventions. Training is evidenced based. He noted that his organization is working on adapting a model for use with young children called, "Handle with Care" program. "Handle with Care" has a web site.

It was pointed out that there is a need to identify components of a healthy family and training to support what this group comes up with in terms of ideas, interventions, screenings, etc.

The Kindergarten readiness calendar was reviewed as one way to package social-emotional health ideas. The tool we develop would need to plug into ongoing quality efforts.

**Agenda Item #1, Continued: Overview of Other Efforts in the Early Childhood Area**

**Discussion:** Bruce noted that SEH needs a rational delivery and implantation model for what we design.

Other comments—

**ECE Tier:** We need to address people negotiating change. There are some controversial issues, particularly in applying quality standards to child care centers. There is a big difference between a “national” group and a “mom and pop” operation. Question: How to you help people adapt and not put out of business. When doing an intervention, it is like working with a family. We need to reinforce quality in all thing related to SEH.

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Quality is holding people accountable—this is our incentive. Where are we now; what is the next level that would improve it?

**Toolkit:** We need to make recommendations for a list of priorities for what should be in the toolkit. Patti is interested in the sub-group. Several people from SEH may want to participate in the sub-group.

The Family Support group will spearhead this tool. They are thinking about a tool that addresses other domains, such as developing training and continuing education. The toolkit will support Medical Home, Parent Education, Social-Emotional Health and Family Support.

**Agenda Item #2 - Brainstorming**

**Discussion:** The SEH Work Group had a series of brainstorm about specific ideas based on requests from other work groups.

**Results:** See the three sheets following this page.

## Social-Emotional Health Work Group

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### **PARENT INVOLVEMENT LEVELS** (Where we are now.)—

- Parents may not like folks meddling in social-emotional issues in child care settings.
  - Parents will become more aware and may be more “critical.”
  - Lots of education needed.
  - Parents want child-care setting to be responsible?
    - shift in role or perception
  - Child care redefined.
  - Media: “Early childhood is more important...more focus on thinking toys”
    - more saturation-more on brain development
    - key intervention points and things going on.
  - School is work and encompasses more things and more work on parent’s part.
  - Breaking cycles.
    - increased female prison population.
  - Do parents have choice in settings?
    - cost, availability, access, schedules, perks (therapy)
    - provide parents with satisfaction survey and feedback about this.
  - Environment: Physical attractiveness, space, cleanliness
    - touchpoints defined—conferences, meeting calls, etc.
    - ways to address concerns.
  - Safety is hook—will respond to this information.
    - (way information is presented)
  - Identifying problems and how do we interpret to parents.
    - lots of staff training to go along with this
    - owner/operator to start with—need to see benefit
    - invite parents early in the process
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**SOCIAL-EMOTIONAL HEALTH SCREENING/TOOLS—**

- Fear of Labels
- Define social-emotional health
- How do we avoid value-laden terms
- What should be there (soc-emot) vs. not there.
- Screen for opportunities for improvement
  - looking for enhancing opportunities
- Series of videos... not too many words
- Have parents apply a checklist first and compare perceptions.
- Focus on applauding positives first.

**RESOURCES FOR FAMILY SUPPORT—**

- Equip Caregivers to help families hook up with resources.
    - Need to feel comfortable in asking for help.
    - Recognizing needs families might have.
    - Parents need to accept this role by child care.
  - May need a resource person with defined role in each setting or as a resource to center.
  - Way to share non –invasive ways.
  - Resources change and need to use technology.
    - Bulletin board/featured resources/web/caregiver focused
  - Caregivers have resources of or use resources they have to update care.
    - Need to be effective consumers of resources to model.
    - We can't ask folks to do differently if we don't do differently.
  - Child Care facilities. Process/Model for implementing change/new information
    - Cultural implications: Welcome the child development training Brenda Reynolds PLC
    - Community organization setting: culture (is more than ethnicity)
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## Social-Emotional Health Work Group

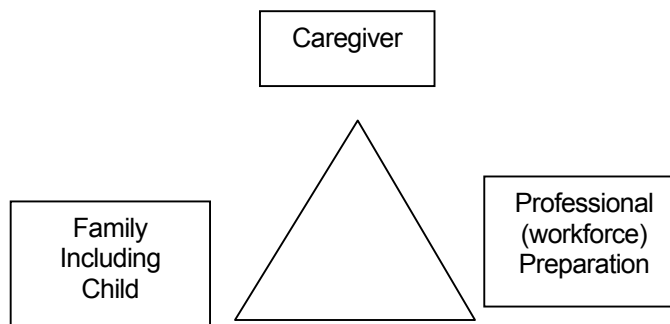
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### **SUPPORT SYSTEM FOR THE CHILD'S MEDICAL HOME—**

- Some emotional issues may present as physical issues
- PCP's need C.E. in various early childhood issues.
  - ✓ How Medical Home relates to all other areas.
- Helping parents communicate with PCP's.
  - ✓ Modeling – training
  - ✓ PCP's have a process to encourage parents ask questions
- MD's need more CE hours ? (in how to deal with parents)
  - ✓ Use school of public health or Peds (MD training)
  - φ Dr. Billy Thomas/Arrington might be helpful related to this.  
Jerry Byrum
  - φ Look at MD issues for involvement
- AR ch. of Peds group

Develop Process for educational involvement



#### **Agenda Item #3: Adjournment and Next Meeting Date**

**Discussion:** The group will meet again in January. There being no further business, the meeting was adjourned.

**Result:** Meeting date and place will be determined later.

**TASKS:** Paula was asked to survey the Social-Emotional Health Work Group again to determine the best meeting date and time in consultation with the co-chairs and Martha.

**NOTE:** Next Meeting Date-- Thursday, January 20, 9 - 11 a.m.

Place: Freeway Medical Center, 5800 West 10<sup>th</sup> Street, Suite 605,  
Little Rock, AR 72204